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|--|--|--|--|--|-----------------|--|-------------------|
| SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS | | | | 1. Requisition Number SEE SCHEDULE | | Page 1 Of 5 | |
| Offeror To Complete Block 12, 17, 23, 24, & 30 | | | | | | | |
| 2. Contract No. DAAE20-01-D-0024 | | 3. Award/Effective Date 2003NOV26 | | 4. Order Number 0006 | | 5. Solicitation Number | |
| 6. Solicitation Issue Date | | | | | | | |
| 7. For Solicitation Information Call: | | A. Name BOBBIE STEGALL | | B. Telephone Number (No Collect Calls) (309)782-3618 | | 8. Offer Due Date/Local Time | |
| 9. Issued By TACOM-ROCK ISLAND AMSTA-LC-CSC-C ROCK ISLAND IL 61299-7630 e-mail: STEGALLB@RIA.ARMY.MIL | | Code W52H09 10. This Acquisition Is <input type="checkbox"/> Unrestricted <input checked="" type="checkbox"/> Set Aside: % For <input checked="" type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) SIC: Size Standard: | | 11. Delivery For FOB Destination Unless Block Is Marked | | 12. Discount Terms 1%-10 DAYS; NET 30 | |
| | | | | <input checked="" type="checkbox"/> See Schedule | | | |
| | | | | <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) | | | |
| | | | | 13b. Rating DOA5 | | | |
| 14. Method Of Solicitation | | | | <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP | | | |
| 15. Deliver To XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001 | | Code W25G1U | | 16. Administered By DCMA ATLANTA 805 WALKER STREET SUITE 1 MARIETTA GA 30060-2789 | | Code S1103A | |
| Telephone No. | | | | | | | |
| 17. Contractor/Offeror CUSTOM TECHNOLOGY OF AMERICA INC. 409 GLOWWORM RD SWANSEA, SC. 29160-9039 | | Code 03YU1 Facility | | 18a. Payment Will Be Made By DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264 Payment will be made by Electronic Funds Transfer | | Code HQ0338 | |
| Telephone No. (803)794-3267 | | | | | | | |
| <input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer | | | | 18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked <input type="checkbox"/> See Addendum | | | |
| 19. Item No. | 20. Schedule Of Supplies/Services | | | 21. Quantity | 22. Unit | 23. Unit Price | 24. Amount |
| | SEE SCHEDULE | | | | | | |
| (Attach Additional Sheets As Necessary) | | | | | | | |
| 25. Accounting And Appropriation Data ACRN: AA 97 X4930AC6G 6D 26FB S11116 W52H09 | | | | | | 26. Total Award Amount (For Govt. Use Only) \$531,900.00 | |
| <input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached. | | | | | | <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached. | |
| <input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda | | | | | | <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached. | |
| 28. Contractor Is Required To Sign This Document And Return _____ Copies <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein. | | | | 29. Award Of Contract: Reference _____ Offer <input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items: | | | |
| 30a. Signature Of Offeror/Contractor | | | | 31a. United States Of America (Signature Of Contracting Officer) | | | |
| 30b. Name And Title Of Signer (Type Or Print) | | 30c. Date Signed | | 31b. Name Of Contracting Officer (Type Or Print) JERRY L YOWELL /SIGNED/ YOWELLJ@RIA.ARMY.MIL (309)782-6736 | | 31c. Date Signed | |
| 32a. Quantity In Column 21 Has Been <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted | | | | 33. Ship Number | | 34. Voucher Number | |
| | | | | <input type="checkbox"/> Partial <input type="checkbox"/> Final | | | |
| 32b. Signature Of Authorized Government Representative | | | | 32c. Date | | 35. Amount Verified Correct For | |
| | | | | | | | |
| 32b. Signature Of Authorized Government Representative | | | | 32c. Date | | 37. Check Number | |
| | | | | | | | |
| 41a. I Certify This Account Is Correct And Proper For Payment | | | | 42a. Received By (Print) | | | |
| 41b. Signature And Title Of Certifying Officer | | | | 41c. Date | | 42b. Received At (Location) | |
| | | | | | | | |
| | | | | 42c. Date Recd (YYMMDD) | | 42d. Total Containers | |
| | | | | | | | |

| | | |
|---|---|---------------------------|
| CONTINUATION SHEET | Reference No. of Document Being Continued PIIN/SIIN DAAE20-01-D-0024/0006 MOD/AMD | Page 2 of 5 |
| Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC. | | |

SUPPLEMENTAL INFORMATION

1. DELIVERY ORDER 0006 HEREBY AWARDS CLIN 0001, HANDGUARD ASSEMBLY, NSN: 1005-01-134-3629, PN: 9349059, AGAINST ORDERING PERIOD 4 AT A UNIT PRICE OF \$6.75 EACH FOR A TOTAL AMOUNT OF \$531,900.00.
2. THE DELIVERY SCHEDULE IS SET FORTH IN THE SUPPLIES/SERVICES PAGES. ACCELERATED/PARTIAL DELIVERIES ARE ACCEPTABLE AS LONG AS THOSE DELIVERIES ARE MADE AT NO ADDITIONAL COST TO THE GOVERNMENT.
3. THE TOTAL DOLLAR VALUE OF THIS DELIVERY ORDER IS \$531,900.00.
4. THIS DELIVERY ORDER IS SUBJECT TO THE TERMS AND CONDITIONS CONTAINED IN THE BASIC CONTRACT, DAAE20-01-D-0024 AND SOLICITATION DAAE20-01-R-0041.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC.

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|---|----------|------|------------|---------------|
| | SUPPLIES OR SERVICES AND PRICES/COSTS | | | | |
| 0001 | NSN: 1005-01-134-3629 FSCM: 19200 PART NR: 9349059 SECURITY CLASS: Unclassified | | | | |
| 0001AA | <u>PRODUCTION QUANTITY</u> NOUN: HANDGUARD ASSEMBLY PRON: M141S183M1 PRON AMD: 01 ACRN: AA AMS CD: 070011HFAM4 <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: COMMERCIAL - SEE SECTION D BASIC CONTRACT UNIT PACK: EA INTERMEDIATE PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W52H093300A153 W25G1U J 1 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001 5,000 19-DEC-2003 002 5,000 19-JAN-2004 003 5,000 19-FEB-2004 004 5,000 19-MAR-2004 005 5,000 19-APR-2004 006 5,000 19-MAY-2004 007 5,000 21-JUN-2004 008 5,000 19-JUL-2004 009 5,000 19-AUG-2004 010 5,000 20-SEP-2004 011 5,000 19-OCT-2004 012 5,000 19-NOV-2004 013 5,000 20-DEC-2004 014 5,000 19-JAN-2005 | 78800 | EA | \$ 6.75000 | \$ 531,900.00 |

Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC.

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|--|----------|------|------------|--------|
| | <div>0155,00021-FEB-2005</div> <div>0163,80021-MAR-2005</div> <div>FOB POINT: Origin</div> <div>SHIP TO: <u>PARCEL POST ADDRESS</u> (W25GLU) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLANDPA 17070-5001</div> <div><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-D-0024/0006</div> | | | | |

Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC.

CONTRACT ADMINISTRATION DATA

| PRON/ | | OBLG | | JOB | | ACCOUNTING | | OBLIGATED |
|--------|-------------|------|------|---------------------------|--------------|------------|--------|------------|
| LINE | AMS CD/ | | | ORDER | | STATION | | AMOUNT |
| ITEM | MIPR | ACRN | STAT | ACCOUNTING CLASSIFICATION | NUMBER | | | |
| 0001AA | M141S183M1 | AA | 2 | 97 | X4930AC6G 6D | 26FB | S11116 | 531,900.00 |
| | 070011HFAM4 | | | | | | | |
| TOTAL | | | | | | | \$ | 531,900.00 |

| SERVICE | | ACCOUNTING | | OBLIGATED |
|---------|---------------|---------------------------|--------------|---------------|
| NAME | TOTAL BY ACRN | ACCOUNTING CLASSIFICATION | STATION | AMOUNT |
| Army | AA | 97 | X4930AC6G 6D | 26FB S11116 |
| | | | W52H09 | \$ 531,900.00 |
| TOTAL | | | | \$ 531,900.00 |